

# Year in registration survey 2024 – Findings report

# **Executive Summary**

This paper presents highlights from our fourth year in registration survey. This survey was launched in mid-July (2024), to seek the views of those who have been HCPC-registered for a year. The survey asks them questions regarding:

- their education and training programme,
- how this prepared them to practice; and
- their first year in employment.

We intend to integrate insight from this work into our education quality assurance activities and inform focus areas for our Policy and Standards and Professionalism and Upstream Regulation teams.

This report highlights key findings from the survey and, where possible, breaks the analysis down by individual professions. Conclusions drawn from the data are indicative; caution should be exercised due to the sampling framework adopted, which was unstructured and non-random. Compared to previous surveys, the response rate for this year was improved, with an 11% response rate, a 2% increase compared to the previous year.

Where relevant, we have picked out key learnings where improvements or further exploration may be of benefit via our ongoing work.

### Contents

Pre-registration education and training	2
Preparation for practice	
The quality of education and training – interprofessional education (IPE)	3
The quality of education and training – programme and staff interactions	4
The quality of education and training – academic learning	4
The quality of education and training – practice-based learning (PBL)	6
Service users in the delivery of education	7
Artificial Intelligence	8
Recommendation likelihood	9
Word association	10
Preceptorship support	11
Availability and length	11
Quality	12
Summary of recommendations	13

# Pre-registration education and training

### **Preparation for practice**

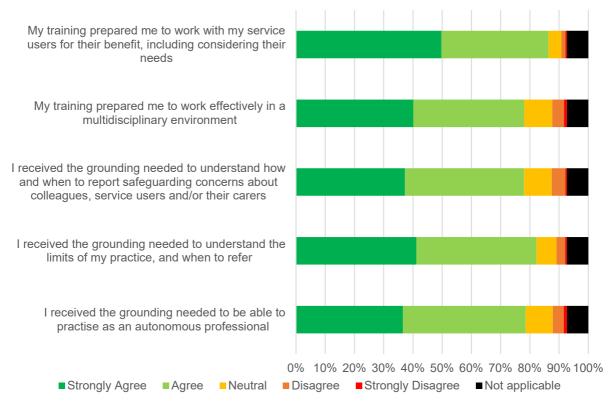


Figure 1 - Preparedness for practice, statement agreement across all respondents (N 2158)

### **Findings**

Responses generally evoked high levels of agreement (78% agreed with statements consistently), which is consistent with the finding and the conclusions of the previous three surveys.

Similar to the previous three surveys, the statements 'my training ensured I understand what I need to do to remain registered' and 'I received the grounding needed to practice as an autonomous professional' received the highest levels of disagreement. However, these equated to <5% of respondents, meaning this was a minority opinion.

The statement evoking the most agreement was 'my training prepared me to work with my service users for their benefit, including considering their needs'. This mirrored the response patterns of previous surveys.

### Profession specific findings

There has been an improvement in the level of agreement among speech and language therapists regarding statements related to preparedness for practice. This is a positive change compared to last year when their levels of agreement were notably lower. Occupational therapists and paramedics reported lower levels of agreement. This indicates these learners may benefit from improved pathways in preparing for practice in future.

### Recommendations

 Explore preparedness for practice findings with occupational therapist and paramedics education providers and professional bodies and provide support for education providers and learners where possible.

### The quality of education and training – interprofessional education (IPE)

This area was intended to capture respondents' experience of interprofessional education and how this impacted their learning and practice.

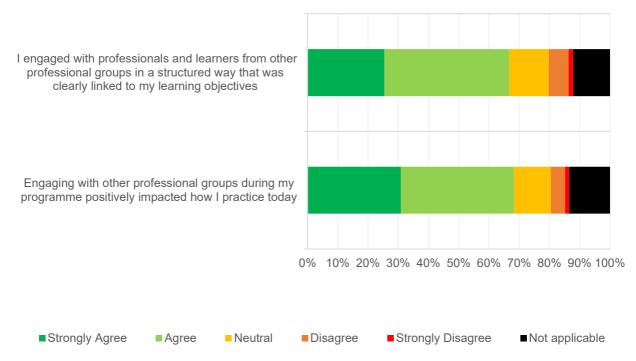


Figure 2 - Quality of education and training (IPE), statement agreement across all respondents (N=2158)

### **Findings**

Interprofessional education (IPE) is an essential part of all programmes HCPC approves and relates to the interactions learners have with professionals and learners from other professional groups. As was the case of the previous survey, agreement with IPE statements continued to outweigh disagreement (70%+).

8% of respondents (an increase of 1% compared to the previous year) reported that they did not engage with other professional groups, which does present concerns as this is a requirement for HCPC-approved programmes. We have asked further specific questions of education providers in this area through our regular performance review monitoring exercise, however the impact of this through survey results will take time to become apparent.

#### Profession specific findings

Similar to last year's findings, biomedical scientists reported the largest proportionate share of all professions for not engaging with other professional groups.

Compared to other respondents, occupational therapists and paramedics were statistically more likely to agree that they had an engagement with professionals and learners and that this engagement was 'clearly linked to learning objectives. This is an improvement in relation to paramedics, who were one of the professions less likely to agree with the statement last year.

### Recommendations

2. Continue to explore interprofessional education through the performance review process.

### The quality of education and training - programme and staff interactions

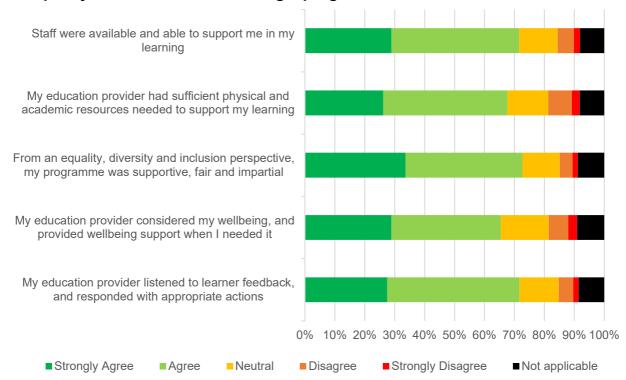


Figure 3 - Quality of education and training (programme / staff interactions), statement agreement across all respondents (N=2158)

#### Findings

The data shows that a vast majority of respondents (72%) had positive staff interactions on their programmes. The statements with the highest agreement are 'From an equality, diversity and inclusion perspective; my programme was supportive, fair and impartial'. This is a change from the 2023 survey, where 'staff were available and able to support me in my learning' had the highest agreement. 'My education provider listened to learner feedback and responded with appropriate actions' was the least agreed statement, which follows the same pattern as the last three surveys.

### Profession specific findings

Paramedics and occupational therapists were less likely than other registrants to agree to statements "staff were available and able to support students in my learning" and "my education provider had sufficient physical and academic resources needed to support my learning," a finding that was echoed in last year's survey regarding Paramedics.

#### Recommendations

3. Continue to explore programme and staff interactions through the performance review process.

### The quality of education and training - academic learning

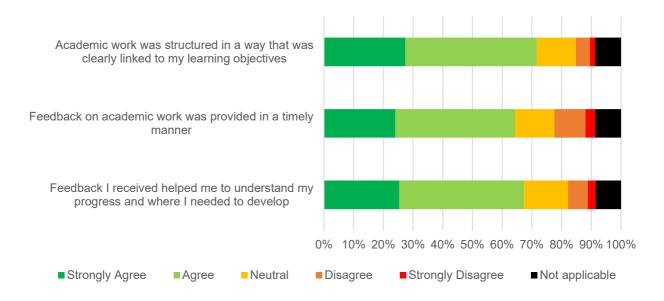


Figure 4 - Quality of education and training (academic learning), statement agreement across all respondents (N=2158)

#### **Findings**

The results show that there was a high level of agreement of 67% amongst respondents, but it was lower than the 2023 results (69%-77%). 'Academic work was structured in a way that was clearly linked to my learning objectives' was the most agreed-with statement which is consistent with the results from the 2023 results. Feedback-related statements received the most disagreement, especially concerning timeliness, mirroring last year's survey results.

Based on insights from our quality assurance processes, stakeholder engagement, and various intelligence sources, we have observed that some education providers are reviewing their staffing arrangements. One of the key findings from our <u>annual reporting exercises</u> related to staffing, that securing adequate staffing numbers was challenging for education providers. The drop in the levels of agreement amongst respondents could have been impacted by the challenges relating to education provider staffing. This suggest this is an area of concern that should be monitored.

### Profession specific findings

Paramedics and occupational therapists were less likely to agree that 'academic work was structured in a way that was clearly linked to my learning objectives'. In contrast, practitioner psychologists were more likely to agree with this statement than average. Paramedics were also less likely than average to agree that 'feedback on academic work was provided in a timely manner'. Arts therapists and occupational therapists were more likely to agree to this statement than average.

Paramedics and occupational therapists were less likely to agree that 'feedback received helped me to understand their progress and where I needed to develop', while practitioner psychologists and operating department practitioners were more likely to agree to this statement that average.

#### Recommendations

4. Continue to monitor staffing changes at education providers, and ensure the sector understands our regulatory requirements for staffing on HCPC-approved programmes.

5. Partner with the College of Paramedics to consider where joint working could benefit the quality of education and training for paramedic learners.

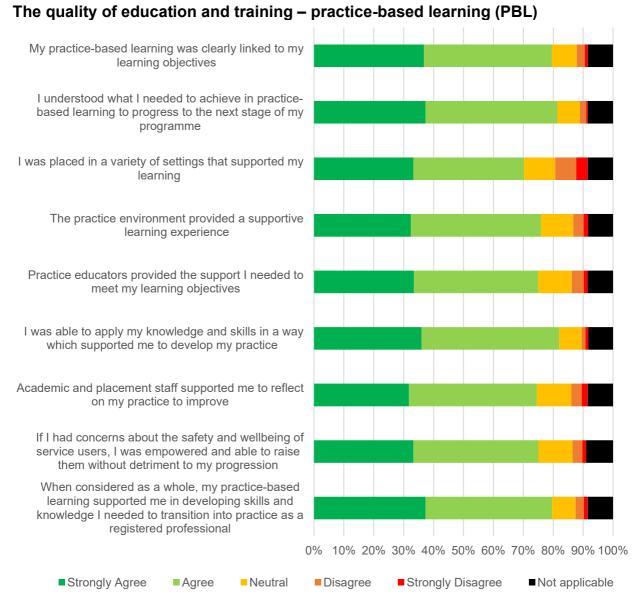


Figure 5 - Quality of education and training (PBL), statement agreement across all respondents (N=2158)

#### Findings

There continues to be a high level of agreement (average 80%) across all statements.

The statements most agreed with by respondents were:

- 'When considered as a whole, my practice-based learning supported me in developing the skills and knowledge I needed to transition into practice as a registered professional'; and
- 'I understood what I needed to achieve in practice-based learning to progress to the next stage of my programme'.

These are different from the statement with the highest level of agreement in 2023, which was that 'I was able to apply my knowledge and skills in a way that supported me in developing my practice'. The high agreement on the first statement indicates that the current practice-based learning framework effectively prepares students for their roles as registered professionals.

The statement 'I was placed in a variety of settings that supported my learning' remained the least agree-with statement.

### Profession specific findings

Paramedics, clinical scientists, and biomedical scientists appeared to have the highest levels of disagreement with these statements, a finding which echoed that of last year's survey.

#### Service users in the delivery of education

This area was intended to capture respondents' experience of interacting with service users in the academic setting, and how this impacted on learning and practice.

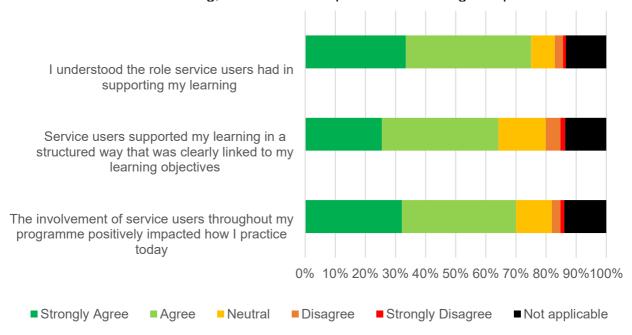


Figure 6 - The influence of service users, statement agreement across all respondents (N=2158)

### **Findings**

As observed in previous surveys, agreements outweighed disagreements across statements examining the influence of service users, which presents a positive picture overall. Despite this, the results were slightly lower than those from the 2023 survey.

The results in this area were slightly lower to the findings from 2021-2023:

- 75% (down 4% from 2023) of respondents agreed / strongly agreed that they 'understood the role service users had in supporting their learning
- 70% (down 5% from 2023) of respondents agreed / strongly agreed that involvement of service users throughout their programme 'positively impacted how they practice today'
- 64% (down 5% from 2023) of respondents agreed / strongly agreed that service users 'supported my learning in a structured way that was clearly linked to my learning objectives'.

To become and remain HCPC approved, all providers must meet a standard which requires service user involvement in programmes. A recommendation from the 2021 survey led to HCPC asking further specific questions of education providers in this area.

6% of respondents reported that they had not engaged with service users in the academic setting, which is 3% less than the 2023 survey. The reduction in the number of respondents who stated they had not engaged with service users is a positive outcome. This may be attributed to the increased requirements for education providers to report their approach to using service users in programmes through our quality assurance process.

#### Recommendations

6. Continue to explore service user involvement by engaging with education providers through the performance review process

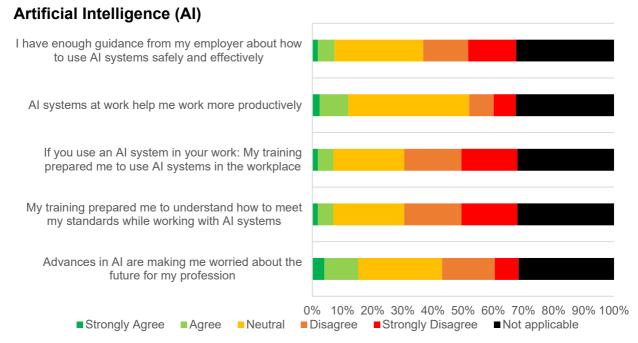


Figure 7 - The understand and use of AI by respondents (N=2158)

#### Findings

This is a new area that was added to the 2024 survey with the objective of identifying the levels of interactions learners and registrants have had with artificial intelligence.

Most respondents replied with neutral (28%) or not applicable (32%) for this question.

For respondents that these questions were applicable to, there was a higher level of disagreement (25%) across all areas compared to other areas of this survey. Two of the questions with the highest levels of disagreement were 'My training prepared me to understand how to meet my standards while working with AI systems' and 'My training prepared me to use AI systems in the workplace'.

The key conclusion from the data is that a significant portion of respondents have not had substantial interactions with Al during their studies. Additionally, among those who did, there is a notable disagreement regarding the adequacy of their training in preparing them to work with Al systems.

The HPC have acknowledged the challenges and opportunities that the education and training sector face due to technological advancements like artificial intelligence. These developments impact both educational practices and emerging areas of practice. In

2024, we provided <u>guidance to stakeholders</u> in this area. We will also asked specific questions related to this area for performance review assessments from the 2024-25 academic year onwards.

#### Recommendations

- 7. Continue to engage with education providers to support them in developing their approach to AI in education
- 8. Findings from the performance review process should be used to identify what additional support and / or information can be provided to stakeholders, and reflect the impact of AI in education back to the sector

#### Recommendation likelihood

Respondents were asked how likely they would be to recommend their programme or education provider to a friend or family member who was considering entering professional training.

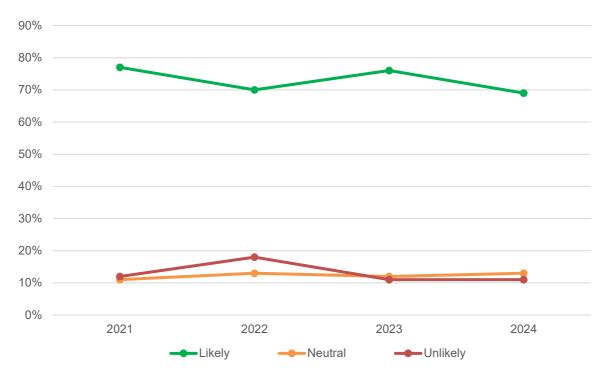


Figure 8 - Recommendation likelihood rating, across all respondents compared to previous years

#### Findings

Overall, the response was positive, with 69% reporting that they would be likely to recommend. Compared to last years results, there has been a 7% decrease in the number of learners who would recommend their programme. This suggests that fewer learners are satisfied or enthusiastic about their experience compared to the previous year. It is notable though that this figure has fluctuated between 77% and 69% over the last four years.

The response from respondents who are unlikely to recommend their programmes has remained consistent at 11% for the past two years, and has dropped from the high point of 18% in 2022.

Changes to the recommendation likelihood results may be due to various factors caused by the challenges being experienced by education providers, including external factors such as funding challenges, staffing changes, and the attractiveness of a healthcare career. Other factors such as programme content, teaching methods, and changing learner expectations might also impact the results.

### Recommendations

- 9. Continue to monitor learner satisfaction data collected through our quality assurance processes to identify specific areas of concerns
- 10. The Year in Registration Survey for 2025 should be updated to enable respondents to provide comments for this section, to enable further insight into the reasons for their responses

#### Word association



Figure 9 - Words associated with programme, all respondents

In previous years, 'supportive' and 'challenging' were the most frequently quoted words respondents reported associating with their programme. This year, the responses have changed. Where 'supportive' continues to be a frequently used word, other frequent positive words are 'thorough' and 'valuable'. More negative words used were 'poor', 'unhelpful' and 'insufficient'

Examining the sentiment of words used, the majority were positive, as was the case in previous surveys.

## Preceptorship support

This is the second time we have asked this set of questions, which has enabled us to compare results to the previous survey to consider any trends.

### Availability and length

This area was intended to capture how respondents felt their employer supported their transition into practice.

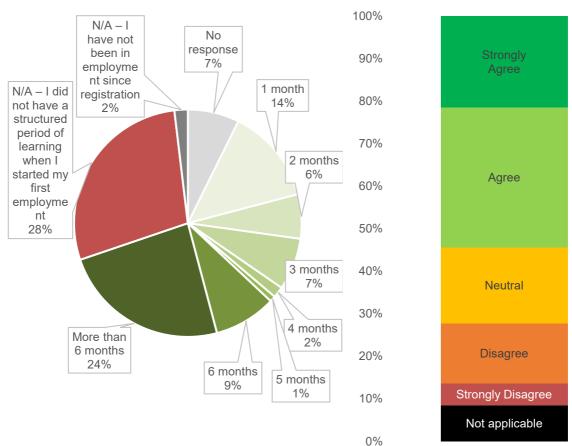


Figure 10 - Length of structured learning across all respondents (N=2158))

Figure 11 – The duration of structured learning and development felt adequate to support my practice, agreement across all respondents (N=462)

### **Findings**

The <u>HCPC principles for preceptorship</u> aim to support registered professionals during key career transitions by providing access to tailored preceptorship programmes. These programmes help ensure safe, compassionate, high-quality care. Developed collaboratively with professional bodies and education authorities, the principles are designed to fit with existing and evolving preceptorship arrangements across the UK.

Based on analysis of the feedback comments of these registrants, we noted that overall, while some respondents had positive and supportive preceptorship experiences, others faced significant challenges due to lack of structure and support.

Some respondents felt unsupported, particularly during the initial months, leading to stress and negative impacts on mental health. There were also reports of inconsistent support and training, with some respondents feeling inadequately prepared for their

roles. 28% of respondents reported not having a structured learning period on entering practice, which is a 6% improvement from last year's findings. This shows that there has been an increase in the number of new registrants who received preceptorship support during their transition into practice.

27% reported that their preceptorship training period was 1-3 months or less. This echoes the findings of last year's survey.

Of those reporting the absence of a structured period of learning, 39% felt this had a negative or very negative impact on their transition from learning to practice. This is a slight improvement of last year's survey which 45% of respondents reported negative experiences in this area.

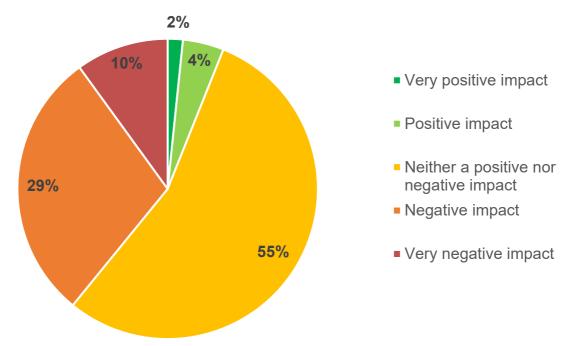


Figure 12 - Impact of not having a structured period of learning upon period of transition from education into practice

However, many respondents felt well-supported, benefiting from structured learning periods, lighter caseloads, frequent supervision, and opportunities to shadow professionals. Several appreciated the structured training and induction periods, which facilitated a smooth transition into their roles. Many highlighted the value of continuous professional development (CPD) and the ability to develop at their own pace. Among those who reported having structured learning and development, more than 55% agreed that the duration was adequate to support their practice. However, this was 19% lower than the findings from last year's survey. This shows there has been a decrease in the level of registrants who were satisfied with the preceptorship support they received.

#### Quality

This area was intended to capture how respondents felt their employer supported their transition into practice. Deeper dive questions from the last section helped to explore whether respondents felt they had enough protected time, adequate support, and considered this time to have positively impacted on their practice.

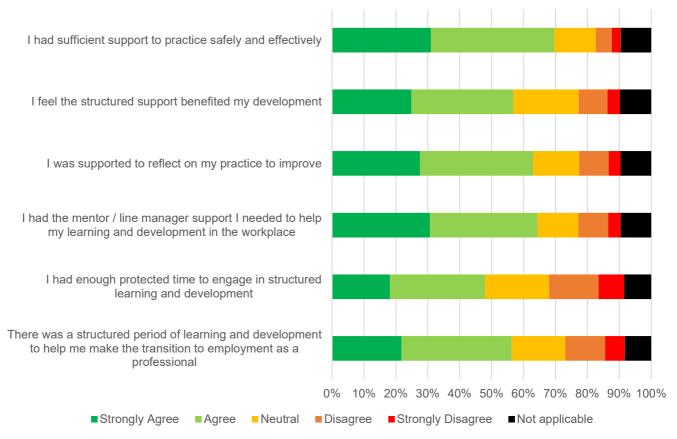


Figure 13 - Preceptorship quality, statement agreement across all respondents (N=2158)

### **Findings**

The agreement generally outweighed disagreement among these statements. The most agreement was elicited regarding the statement 'I had sufficient support to practice safely and effectively' (70% agreement).

Similarly to last year, the most disagreed with statement was "I had enough time to engage in structured learning and development". This shows, which demonstrates a significant proportion of respondents were not able to dedicate enough time to their preceptorship learning.

### Profession specific findings

Practitioner psychologists, and occupational therapists consistently agreed more than average towards these statements.

Paramedics were less agreeable to most statements; this shows there is further work to do within this profession to support new registrants in practice. These findings were similar to last year.

### Recommendations

- 11. Support and influence employers to embed our principles for preceptorship and increase the support provided.
- 12. Consider how we measure success of the implementation of the Principles for Preceptorship

# Summary of recommendations

- 1. Explore preparedness for practice findings with occupational therapist and paramedics education providers and professional bodies and provide support for education providers and learners where possible
- 2. Continue to explore interprofessional education through the performance review process
- 3. Continue to explore programme and staff interactions through the performance review process
- 4. Continue to monitor staffing changes at education providers, and ensure the sector understands our regulatory requirements for staffing on HCPC-approved programmes
- 5. Partner with the College of Paramedics to consider where joint working could benefit the quality of education and training for paramedic learners
- 6. Continue to explore service user involvement by engaging with education providers through the performance review process
- 7. Continue to engage with education providers to support them in developing their approach to AI in education
- 8. Findings from the performance review process should be used to identify what additional support and / or information can be provided to stakeholders, and reflect the impact of AI in education back to the sector
- 9. Continue to monitor learner satisfaction data collected through our quality assurance processes to identify specific areas of concerns
- 10. The Year in Registration Survey for 2025 should be updated to enable respondents to provide comments for this section, to enable further insight into the reasons for responses
- 11. Support and influence employers to embed our principles for preceptorship and increase the support provided.
- 12. Consider how we measure success of the implementation of the Principles for Preceptorship